

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

Full Name (Last, First, Middle Initial)

A. MCCASKILL FOR MISSOURI 2012

Mailing Address 426 C STREET, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

CLAIRE MCCASKILL

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MO District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : EXPB108658

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MCCASKILL FOR MISSOURI 2012

Mailing Address 426 C STREET, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

CLAIRE MCCASKILL

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MO District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : EXPB108659

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

011

Candidate Name

MIKE THOMPSON

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 01

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : EXPB108676

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

11500.00

TOTAL This Period (last page this line number only)..... ▶